



PO Box 6354 Park Beach Plaza COFFS HARBOUR NSW 2450
 at the entrance to the Showground, Pacific Highway, Coffs Harbour
 Phone: 02 6652 2545 Email: chcagclassesworkshops@gmail.com

Art Demonstration BOOKING FORM

PLEASE PRINT

NAME _____

PHONE (H) _____ (M) _____

EMAIL _____

NAME OF ART DEMONSTRATION plus CODE

1. _____ CODE: _____

If you are booking for more than one person, please enter their names below:

1. _____
2. _____
3. _____

Cost of Art Demonstration is \$20.00 per person

AMOUNT PAID \$ _____

PAYMENT OPTIONS

Cheque \$ _____

Cash \$ _____

Made payable to CHCAG

In Person: Fill in the form, place it together with your payment in the envelope provided and put in the Treasurers Green Letterbox in the Gallery

Post: Fill in the form, post it together with your cheque payment to the postal address above.

Internet Direct Deposit \$ _____

Date _____

Receipt # _____

DIRECT DEPOSIT:

Account Name: Coffs Harbour Creative Arts Group
Banacoast Credit Union (a division of Police & Nurses Ltd)
BSB: 533 000

Account Number: 32830906

Please Note: New Account Number

Your payment reference must be coded with your Surname, Initial, e.g. SmithG M followed by the Art Demonstration Code

Internet Banking: Please complete this interactive PDF form and email the completed form together with your direct deposit receipt number to the Treasurer chcagtreasurer@gmail.com